

The Examiner

Naval Hospital, Twentynine Palms

"Serving with Pride and Professionalism"

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Spotlight on...

Sheri Wysocki: Nurse, MSW Assist. Division Officer, morale booster for both staff; patients

By Dan Barber

"This is the first job I have ever had that I really enjoy, I look forward to getting up in the morning and coming to work," says Sheri Wysocki, Multi Service Ward Assistant Division Officer. Others who work with Sheri are eager to express how wonderful it is to work with her. "Sheri is an excellent nurse who is a warm caring person and is fun to be around. She has a great sense of humor, is wonderful with the patients and staff and one of the best nurses I've ever worked with," says Ensign Amy Pedrick.

Sheri's philosophy in patient care is to treat the patient as a whole person, not just take care of the patient's medical needs. "When I was about 15 I was in the hospital and a nurse there really cared about how I felt emotionally," says Sheri. "That really impressed me and that is how I want to treat the patients here. I pay particular attention to a patient's spiritual and personal needs. I want them to feel that we really care about them. I am a patient advocate 100 percent," she added. "I am very protective of my patients."

Sheri first came to Twentynine Palms with her family from Hammond, Indiana. Her father came here to open a business, Art's Drive Thru, now Andrea's Restaurant. She graduated from Twentynine Palms High School and then went on to attend Nursing School at the College of the Desert. After graduation from college she went to work in the Cardio/Thoracic Intensive Care Unit at Desert Hospital in Palm Springs.

Sheri came to work at Naval Hospital Twentynine Palms on October 6, 1993 as a Registered Nurse, however, this wasn't Sheri's first experience with the Naval Hospital. She worked in the old facility as a teen volunteer for two years while she was still attending high school.

It seems that Sheri can't or won't sit still when there is something she thinks is important to do. She is the self-appointed party and potluck organizer for the Multi Service Ward; one of the ward's enthusiastic holiday decorators (she was cutting out decorations during this interview); staff and patient morale booster and cheerleader.

What everyone here at the hospital has seen of Sheri is only a part of her total makeup. Sheri is also heavily involved with making the community a better place to live. She is a member of the School Site Council at Twentynine Palms Junior High School. This is a board of four parents, Continued on page 7.



Sheri Wysocki is always ready to help out the staff of the Multi Service Ward in getting the job done

Emergency Room on top of all patient healthcare needs here

By Dan Barber

One of the major access centers to Naval Hospital Twentynine Palms is the Emergency Medicine Department (EMD), or better known to patients as the Emergency Room.

The hospital's EMD, headed by Lieutenant Commander Blake Montana, is a state-of-the- art facility with a highly trained staff of three active duty Navy emergency physicians, five Lloyds contract physicians; a nursing staff of eight headed by Lieutenant Commander Paula Pendrick; 22 Corpsmen and three civilian Ward Clerks.

Open seven days a week, 24-hours a day every day of the year, EMD personnel are dedicated to providing the best possible emergency care to beneficiaries.

Concerned with a sometimes long waiting period for patients with non-life threatening illnesses or injuries, the hospital recently took steps to increase medical services to patients and to decrease the waiting period before a patient could be seen by a doctor. This was accomplished by opening up Family Practice Clinic to evening appointments. "The changes we have made have resulted in shorter wait times, happier patients, and a safer EMD environment," says LCDR Montana. Prior to the changes, the wait time in the Emergency Room averaged about two hours. That wait time is now down to about 20 minutes in normal situations.

A top priority of the ER is training. LCDR Montana said, "Before anyone is allowed to work in the ER they Continued on page 7.

The Hart of the Matter!

"Looking Back At 1994"

With the close of 1994, we can look back with pride in what has been accomplished at Naval Hospital Twentynine Palms. Our civilian and military staff has grown tremendously—with the result that we can now offer the type of services and accessibility of services that our customers want and deserve. Just take a look at how much we have accomplished!

- Military staff has increased from 236 to 335. This includes the addition of five doctors and 12 nurses, 82 corpsman, and ten ancillary and support staff.
- Civilian staff has increased from 120 to 149.

We have expanded services and added new services in many other areas.

- Orthopaedics is now available to all our beneficiaries.
- Family Practice operates clinic four nights per week.
- The addition of second and third residency trained emergency medicine Navy physicians has greatly improved services in the ER.
- Immunization clinic has expanded its hours.
- A new maternal-infant ward offers care focused on new mothers and infants.
- Optometry offers some night clinics.
- A streamlined and centralized appointment system has facilitated responsive and timely appointmentmaking.
- In-house meal service now available for breakfast and lunch.
- We've added this hospital newsletter in an attempt to improve communication.
- Passed IG
- Passed JCAHO
- Acute Care Clinic Dr. Stoebner
- Hired Discharge Planner/Patient Educator
- Started a Coumadin Clinic
- 1st Total Knee Replacement done June 1994
- The Management Information Department is in the process of getting the CHCS on line and is getting everyone trained in its use. They have also added Med-OA and have

improved the MEPRS/WORS reporting.

Yes indeed, we have much to be thankful for this holiday season. The improved services we are now able to provide our patients should be a source of pride for us all as we look back on 1994. Thank you one and all!



Captain S. E. Hart

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The EXAMINER welcomes your comments and suggestions concerning the newsletter. All comments should be forwarded to the Public Affairs Officer by the 15th of each month. The Public Affairs Office telephone number is (619) 830-2362. The EXAMINER staff would like to thank all those who participated in this Edition.

Master Chief's Soap Box

Is there anyone out there who enjoy inspections?



HMCM R. A. Lubitz

Here we go again, this will be my fifth article for the "Examiner" which means there are only five more to write before I fade into the sunset. As I start this article it is Thursday, the 1st of December and the "JCAHO" surveyors have just left after completing their first day of inspecting. If the feed back I have been receiving is accurate I would say we are well on are way to a very successful survey. Obviously by the time you read this article the results will be known. However I don't

think it is premature to say, "Congratulations Commander Leary, You did one Outstanding Job and deserve a big "thank you" from the entire staff of this hospital.

I doubt if you will find anyone who will tell you they enjoy or look forward to an inspection! And I mean any type of inspection, JCAHO, IG, NOSHIPS, Health Records, Personnel, you name it and most of us hate it. But the simple truth is, it is part of our way of life in the military and probably even more so in the Medical Field. At times it seems like everyone wants a piece of the action, we no sooner successfully complete one inspection and another is just on the horizon. I mean don't these people have a real job?

However, I also think most of us realize that when you deal in human lives you can not afford to have an organization that is anything less than "Top-notch." Our patients, (who also could be your family members) have certain expectations regarding what they feel is "Quality Medical Care" and it is our responsibility to live up to those expectations. When we fail to live up to those expectations or, even worse, when we fail to live up to our own standards of care then we face the potential loss of our patients trust and confidence.

Therefore we must be ever vigilant to assure we protect the trust and confidence that our patients have bestowed on this hospital. And whether we like to admit it or not, inspections such as "JCAHO," "IG" and "NOSHIPS" help to keep us on the correct path. They force us to periodically step back and review what we do, how we do it and how well we do it. These obviously are not perfect gauges of excellence or mediocrity but they do serve their purpose. They serve to periodically awaken some of us to the potential evils of complacency in a work environment that can not afford complacent attitudes or performance.

Each and everyone of you took a pledge the day you graduated from Hospital Corps School, remember: "I solemnly pledge myself before God and these witnesses to practice faithfully all my duties as a member of the Hospital Corps. I hold the care of the sick and injured to be a privilege and a sacred trust and will assist the

Medical Officer with loyalty and honesty. I will not knowingly permit harm to come to any patient. I will not partake of nor administer any unauthorized medication. I will hold all personal matters pertaining to the private lives of patients in strict confidence. I dedicate my heart, mind and strength to the work before me. I shall do all within my power to show in myself an example of all that is honorable and good throughout my naval career. I hope that pledge still has meaning to you! Each of you carry an awesome responsibility and I'm afraid we tend to forget that at times.

So next time you find yourself being inspected by someone like JCAHO, IG, OR, or NOSHIPS don't automatically assume each and everyone of those inspectors or surveyors is the enemy and a threat to your perceived competency or ego. Don't place yourself in the role of the white knight, defending your kingdom from attack from the dreaded "Outsiders." Because the fact is that if you stay in long enough you may find yourself in the role of the "Dreaded Outsider." And then you may discover, to your surprise, that they are just ordinary people. You got it, ordinary people like you and me doing a job that requires doing. And in most every case, doing it extremely well.

Blood Drive set for Jan. 19

Every day, someone's best friend, child or spouse needs blood desperately. What if is were someone you knew or loved who needed that blood and it wasn't available? By donating blood, you could be responsible for saving someone's life.

On Thursday, January 19, Rancho Mirage Community Blood Bank will have their bloodmobile at the Naval Hospital. The blood drive is targeting largely untapped groups such as military family members, civilian employees, retirees and hospital staff as potential donors, but all who qualify, including active duty Sailors and Marines are welcome to donate. Staff from the blood bank will be present to collect the blood and to answer any questions. No appointment is necessary.

Healthy individuals between the ages of 18 and 65 can donate blood. You will not qualify to donate if you have had major surgery, tattoos or ear piercing in the last year, dental work (excluding cleaning) in the past 72 hours, or are on medications except vitamins, tylenol, or birth control pills. There will be a screening performed on site to see if you qualify before you donate the blood.

Rancho Community Blood Bank supplies blood to the entire high desert area, including the Naval Hospital, and needs your donation, especially if you have the blood types O negative, O positive, AB negative and AB positive. Your blood is especially needed after the holidays. A few minutes of you time is a lifetime for someone else.



Santa took time out of his hectic holiday schedule to pay a special visit to Naval Hospital Twentynine Palms.

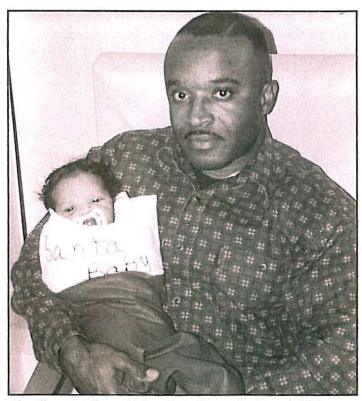
The Pelikan Brief

Christmas is a 'Christian' celebration of Christ's birth

Well just when I thought it was safe to talk about Christmas and it's "real meaning," I was assaulted by one of those "demythologizers." ...Or in this case maybe I should say, "mythologizer," anyway, one of those people who have to keep pointing out how horrendous it is to celebrate Christmas because of all the "pagan" symbolism involved in it!

There I was minding my own business when a dear friend of mine who lives here in the local Twentynine Palms area, popped in to show me something. It was a copy of an article from a local newspaper. The article was by a guy from down the hill who's got it in for anyone who says that the "real meaning" of Christmas has anything to do at all with the birth of Christ! He says no! It's a pagan holiday. And it's been a pagan holiday longer than it's been a Christian one!

To that I say, "so what!" Most people today would have no idea that the season in which we now celebrate Christmas was a pagan celebration, were it not for people like this gentleman. He feels that we've all been duped because we see it as a celebration of the birth of Christ, and that somehow, therefore, it is his sacred duty to inform the "dumb" masses about the so-called real truth. What amazes me is that if Christmas has been a pagan holiday for 10,000 years or more like he says, how is it that no one knows this today? I'll tell you why;



First Sergeant James Robert Futrell proudly shows off his new born son James Edward Futrell. As a special holiday treat the Mother Infant Ward Staff presents new babies to parents bundled up in a Christmas stocking.

it's because the early followers of Christ, who decided to celebrate His birth on this most pagan of holidays, substituted the pagan celebration with a Christian one! And in significantly less than the 1,600 years or so that they've been doing it, almost the entire world has totally "forgotten" about the day's former pagan significance. That's a pretty amazing testimony to the powerful nature of the story. From "Peanuts" to "LIFE" magazine, everyone is talking about the significance of Jesus; born in that stable so long ago, in that little obscure town and country in the Middle East.

Whether or not it was the 25th of December, during the celebration of the Winter Solstice, nobody cares. The fact that His birth took place at all is what really matters. The results of that birth, and the effect it has had on the history of the world, still speak louder than any argument against its relevance, or what it has displaced.

So, Merry "Christmas" to all, and to all, a good night!

Chaplain Pelikan

'You said what?'

By Lin Harris

Most of us learn unique terminology as part of our daily work. Words we use in military facilities are not often heard or spoken in the civilian sector.

For those who are new to the military world, the following acronyms and what they stand for may be helpful. In this issue we will start with the most common acronyms that are frequently heard, seen or used at this command.

JCAHO: Joint Commission for Accreditation of Hospital Organizations

IG: Inspector General

DOD: Department of Defense **TQL:** Total Quality Leadership

CHCS: Composite Health Care System

MEPRS: Medical Expense and Performance Reporting System AQCESS: Automated Quality of Care Evaluation Support System DEERS: Defense Enrollment Eligibility Reporting System

POC: Point of Contact COB: Close of Business

MTF: Military Treatment Facility

FAX: Facsimile

OOD: Officer of the Day **MOD:** Mate of the Day

CHAMPUS: Civilian Health And Medical Program of the

Uniformed Services

The following are abbreviated titles for senior leaders at the Naval Hospital Twentynine Palms:

CO: Commanding Officer

XO: Executive Officer

CMC: Command Master Chief

DAS: Director, Ancillary Services

DFA: Director for Administration

DMS: Director, Medical Services

DNS: Director, Nursing Services

DSS: Director, Surgical Services

PIC: Performance Improvement Coordinator

To Your Health

What is the disorder: Carpal Tunnel Syndrome

By Dr. Kenneth Koskella

Carpal tunnel syndrome is a common disorder of the wrist and hand that is characterized by pain, numbness and tingling of the thumb, index finger

and ring fingers.

How does it occur? The wrist has a tunnel through which the median nerve travels. It is bounded by bone on three sides and a tight ligament on the fourth side. There is no room for swelling or space occupying masses, these cause compression of and damage to the median nerve within this rigid tunnel. People who use their hands repeatedly in the same way (for example, illustrators, carpenters, assembly-line workers, typists) develop Carpal Tunnel Syndrome from repetitive trauma to the median nerve.

Pressure on the nerve also may be caused by a fracture or other injury, which may case inflammation and swelling. In addition, pressure may be caused by inflammation and swelling associated with arthritis, diabetes,

pregnancy and hypothyroidism.

Symptoms include:

-pain, numbness, or tingling in your hand and wrist, especially in the thumb/index/middle fingers.

-increased pain with increased use of the hand increased pain at night

-weak grip and tendency to drop objects held in the hand

-sensitivity to cold

-muscle deterioration, especially in the thumb (in later stages). How is it diagnosed? Your doctor will review your symptoms, examine you, and discuss ways your hands are used. He/She may also do the following tests:

-The doctor may tap inside the middle of your wrist over the median nerve. You may feel pain or sensation like an electric shock along the course of the median nerve.

-you may be asked to bend your wrist down to see if this reduces your symptoms.

 -The doctor may arrange to test the response of your nerves and muscles to electrical stimulation.

-The doctor may measure the sensory nerve function for each of your fingers and thumb by measuring the minimum distance apart you can discriminate two sharp points from one single point.

Treatment of the disease may relieve our symptoms. Other treatment focuses on relieving irritation and pressure on the nerve in your wrist. To relieve pressure, your doctor may suggest:

-restricting use of your hand or changing the way you use it.

-wearing a wrist splint during sleep and physical activity involving the wrist.

-exercises

Your doctor may prescribe a corticosteroid injecting into the wrist or a nonsteroidal anti-inflammatory medicine like motrin or naprosyn. In many cases, surgery may be necessary to relieve symptoms.

How long the symptoms of carpal tunnel syndrome lasts depends on the cause and your response to treatment. Sometimes the symptoms disappear without any treatment, or they may be relieved by nonsurgical treatment. If your symptoms last longer than three months, surgery may be necessary to relieve the symptoms. Surgery usually relieves the symptoms completely, especially in patients in whom electrical tests are abnormal. Symptoms that occur during pregnancy usually disappear following delivery.

Follow your doctor's recommendations. Also try the following:

-Elevate your arm with pillows when you lie down.

-Avoid activities that overuse your hand.

-Find a different way to use your hand by using another tool or try to use the other hand.

-Avoid bending your wrists down for long periods.

Carpal Tunnel Syndrome can be prevented. If you do very repetitive work with your hands, make sure that your hands and wrists are comfortable when you are using them. Take regular breaks from the repetitive motion. Avoid resting your wrists on hard surfaces for prolonged periods. In some cases, the case is not known and Carpal Tunnel Syndrome cannot be prevented.

If you have questions or comments regarding Carpal Tunnel Syndrome or other topics, contact Charlotte Meinecke, Nurse Educator, Naval Hospital, 830-2218.

Volunteers Needed

Information and Guidance, (IG) Volunteers are needed to provide limited telephone counseling and refer cancer patients and their families to community services. They also answer inquires from the general public about cancer, risk reduction, and early detection and treatment. IG volunteers work in three hour shifts in the Yucca Valley office located at the Visiting Nurses Association, 56351 29 Palms Highway, Yucca Valley.

Office Assistants are needed to perform a variety of clerical tasks in the Yucca Valley office. Some volunteers answer the telephone and assist with processing donations, while others assist with preparing materials for presentation to the public. Volunteers work in shifts on a weekly basis.

Drivers are needed to transport patients to and from treatment on an "as needed" basis. Hours are flexible, depending on patient need and driver availability. A good driving record, reliable vehicle insurance and a compassionate nature are required. Supplemental liability insurance is provided and vehicle expenses are tax-deductible.

Education Outreach Volunteers with organizational skills and a pleasant telephone voice are needed to contact groups and organizations about life-saving educational programs, and to coordinate programs with speakers' schedules. A working location in the Unit office in Yucca Valley is provided.

Speakers with public speaking ability, transportation and some spare time are needed to present a variety of educational programs to groups of non-professionals. Orientation, materials and audiovisuals are provided.

If you are interested in volunteering in any of these vital areas, please contact the American Cancer Society at 365-9828.

How job related illnesses can develop

By J. HAAS

How can employees get sick on the job? A harmful agent can gain entry into the body by:

*Inhalation. A substance is breathed into the lungs, possibly passing into the blood stream and reaching the brain and other vital organs.

*Ingestion. In this process, the material is swallowed -- and in the workplace, harmful chemicals may be swallowed unknowingly. That's why persons working around lead are not permitted to eat or smoke in the work areas and why careful hand washing is required before eating and at the end of each shift, lest lead dust be ingested with food or smoking materials.

*Absorption. In this route or entry, chemicals pass through the skin barrier - some more readily than others -- particularly if the skin is cut or damaged. Some chemicals may also damage the skin by direct contact with the surface.

HEALTH CARE CONSUMERS COUNCIL SCHEDULES NEXT MEETING FOR JAN. 19

The quarterly meeting of the Health Care Consumers' Council will be held on 19 January 1995 at 1000 in the Commanding General's Conference Room, Building 1559.

The Health Care Consumers' Council is open to the public and is a forum for all beneficiaries to obtain information, and to provide suggestions for improving services provided by the hospital. Representatives from every unit and organization on board the Marine Corps Air Ground Combat Center attend the meeting to obtain information and address their units' concerns regarding services provided by the hospital. However, everyone is encouraged to attend, and suggestions are greatly appreciated.

The mission of Naval Hospital Twentynine Palms is to provide the highest quality of health care to the greatest number of beneficiaries. Please join us as we work together to improve the health and welfare of our community. For additional information, please feel free to contact Ensign Batschi, Head, Healthcare Relations, Naval Hospital at 830-2574.

*Injection. Such as contaminated needle sticks and insect bites. In this route of entry bacterial and viral disease may be transferred.

Chemical Hazards can evolve from excessive concentrations of mists, vapors or gases in the air in the form of dust or fumes. Besides the potential for inhalation, many of these materials can act as skin irritants or may be absorbed into the skin.

Physical Hazards include excessive levels of noise, or vibration as well as extremes of temperatures and pressure.

Biological hazards can come from insects, molds, fungi and bacterial contamination of food and water.

Ergonomic hazards stem from poorly designed work areas or hand tools, improper lifting or reaching, or repeated motions (usually forceful) in awkward position.

The effects of exposure to these hazards may be acute (produce an immediate response or chronic (resulting from longer exposure at a lower intensity over time.)

Preventing Occupational Illness

Some tips to help employees prevent job-related illnesses:

* Employees should know the materials or chemicals they are working with and what illnesses can be caused by overexposure. A valuable guide to job health exposures are the Material Safety Data Sheets (MSDS) for the chemicals in use, which OSHA's Hazard Communication Standard requires employers to collect and make available to workers.

* Managers and supervisors need to be sensitive to employee health complaints and might even consider initiating informal surveys of employee health concerns relating to workplace conditions or exposures.

* Employees should watch for patterns of not feeling well -- for example, a health problem that occurs while at work but clears up on weekends or during vacations, or one that affects only employees in a certain department or those performing a particular task. If such patterns are noted, employees should notify their supervisor and seek help from a health professional for more detailed investigation of these complaints.

* Dry or course skin is a problem encountered by many factory workers, often as the result of using one or more common solvents. Wearing gloves, apron, boots and other items of protective clothing can minimize or eliminate the risk of contact dermatitis. Barrier creams may also provide effective protection from some chemicals.

* Careful attention to personal protective equipment is important to protecting employees on the job. Equipment should be repaired or replaced.

* Good ventilation minimizes on-the-job breathing problems. Exhaust vents and hoods should always be used where provided. These venting units should be in good working order and their filters cleaned regularly.

* Personal hygiene and good health off the job are important too. Washing hands before eating and after handling any articles that are dirty, rusty, greasy, or possibly contaminated with a hazardous substances is little more than common sense. Having work clothing laundered and kept separate from street clothing is also important -- and employers may be required to provide facilities for this measure. Good nutrition and regular exercise will also help employees keep well.



The Emergency Room team work together as a team to move a patient to a back board to prevent further back injury to the patient.

--Emergency Room

Continued from page 1

have to be fully qualified in the Cardio Pulmonary Resuscitation (CPR) protocol. In addition, the physicians must be Pediatric Advanced Life Support (PALS) and Neonatal Advanced Life Support (NALS) qualified. The nurses must be qualified in Advanced Cardiopulmonary Life Support (ACLS).

The ER has seven beds and is equipped with a trauma room. "Unfortunately, the trauma room has been utilized for some touch-and-go cases." LCDR Pendrick said. "Fortunately the staff worked extremely hard on researching some civilian trauma rooms, and equipping ours so that we have been able to save some lives that otherwise may have been lost," she added.



It is very important for the ER staff to follow procedures to the letter, not only for the patients protection, but also for the staff members safety.

The current staff of EMD consists of: LCDR Montana, Head, Emergency Medicine Department; staff physicians LCDR Robert Satonik; LCDR Todd Ewert; Lloyds contract physicians, Dr. Rodney Bluth; Dr. Caroline Moore; Dr. Phillip Bretz; Dr. Danya Dilley and Dr. Graydon Skeoch. The nursing staff, headed by LCDR Pendrick, consists of Lt. Lisa Stensrud, the Emergency Department Division Officer; Lt. Donna Hoffman, Assistant Division Officer; Lt. Paul Barfknecht; Lt.j.g. Katherine Boyd; Lt.j.g. Paula Fischer; Lt.j.g. Adrienne Patterson; and Mrs. Leslie Braun. The Corpsmen assigned to ER are: HM1 Manuel Barcelona, Leading Petty Officer; HM2 Douglas Brown; HM3 Dianne Davis; HM3 Craig Elias; HM3 Kenneth Holland; HM3 Scott Dombroski; HM3 Shawn Sexauer; HN Angela Gutierrez; HN Steven Hall; HN Benjamin Pieper; HN Shane Winslow; HN Donald Woodruff; HN Christina Ehlers; HN Travis Mahan; HN Lucas Keeter; HN Logan Fisher; HN Richard Walker; HN Joseph Heinzman; HA Katrina Barron; HA Lance Bryan; HA Douglas Reynolds; and HA Travis Walker. Ward Clerks are Mrs. Gina Deavers; Mrs. Norma Noble; and Mrs. Som Harz.

-Wysocki: Head Cheerleader

Continued from page 1

four teachers the Principal and a local government representative. This group makes changes on school policies and procedures governing the school and the school's student body. In addition, Sheri is involved with the charitable organization in town called God's Closet. This group collects food and clothing for distribution to the needy.

"I may be a workaholic, but I am happiest when I am with my husband and children," says Sheri. She is married to Slawomir "Ski" Wysocki. They have two boys Jared, 13 and Adam 3. "We enjoy doing many family activities together," says Sheri. "My son Jared has been involved with the youth sports program at the Recreation and Parks Department here in Twentynine Palms for about five years now. We really enjoy going to his games," she added. "Jared is a really good kid, he is a good student, and I really appreciate that in these times," said Sheri. "Adam is into terrorizing the household and pets right now, which includes a dog, a turtle and a pot bellied pig, so he keeps all of us busy at home," Sheri says with a grin.

Sheri's husband, Slawomir "Ski", was in the Marine Corps when

Sheri's husband, Slawomir "Ski", was in the Marine Corps when they met. Since then he has followed Sheri into the medical field. Currently Ski works as a Health Unit Coordinator at Hi-Desert Medical Center and is going to school full time.

The consensus around the hospital is that both the staff and patients are lucky to have someone like Sheri Wysocki around to look after us.

Kudos to Hospital Staff

Special Congratulations goes out to the following people after receiving a Certificate of Commendation from the Marine Corps Air Ground Combat Center Commanding General for superior performance.

HMC R. Balagot Mr. O. Goldsmith HM1 C. Roberson HM1 C. Sipriaso HM2 V. Joshlin HM2 S. Sterrett HM3 K. Hendricks HM3 J. Howard HM3 M. Keever HM3 C. Owens HM3 D. Spears HN T. Martin HN S. Martin HN L. Selles HN A. Williams

<u>Civilian Issues</u> By Linda Jensen

Dawn of new age in HRO

The Federal Government is going through a period of changes to the Field of Human Resource Management.

Office of Personnel Management (OPM) has issued the FPM Sunset Document. This document lists each specific chapter, subchapter, supplement, letter and bulletin that has been abolished. It also lists, chapter by chapter, those materials that will remain in effect. These materials are being provisionally retained until they are replaced by other issuances.

With all the many changes taking place in Personnel, the way things were done yesterday, may not be how they are done today. This includes regulations to employment, performance appraisal system, retirement, life insurance, health benefits and incentive awards to name a few.

What does all this mean to you, the employee? All of these issues pertain to the employee as well as management. You, as the employee need to keep abreast of any changes to the various benefit programs (life insurance, retirement, health insurance). If HRO conducts a training seminar on one of the benefit programs, make a point to attend.

How does this effect management? Regulations for employment and promotions as an example may have changed from how they were processed years ago, to new regulations today. HRO is constantly keeping us abreast of changes as they occur. So keep in mind, actions might have been processed differently years ago to what they are today.

Remember, don't hesitate to ask if you're not certain about issues pertaining to personnel. This may be the sunset of the Federal Personnel Manual, but it's the dawn of a new age in human resource management.

The Point of Contact on civilian personnel matters is Linda Jensen, at extension 2517, or the Human Resource Office at extension 7363.



HM1 Jacquiline Johnson bids a fond farewell to co-workers during her retirement ceremony. Petty Officer Johnson now resides in Dorchester, South Carolina.

Enrollment high for Aetna Government Health Plans CHAMPUS program

Physician Network Grows 32 Percent

Since taking over the CHAMPUS contract in California and Hawaii, earlier this year, Aetna Government Health Plans reports that enrollment in its managed care program is currently exceeding 5,000 new members each month, a 12 percent increase over the prior CHAMPUS contractor, according to Robert H. Kaplan, Vice President, Aetna Government Health Plans/CHAMPUS Division.

Aetna administers the CHAMPUS (Civilian Health and Medical Program of the Uniformed Services) program, known as TRICARE for California and Hawaii.

TRICARE (TRICARE-Prime-HMO, TRICARE Extra-PPO and TRICARE Standard-Indemnity) is the Department of Defense health plan covering more than 720,000 active duty family members and retirees.

"We are way ahead of schedule in enrolling new members in our TRICARE Prime program. This steady increase in members is testimony to the quality of service we provide, "Kaplan said.

Some highlights of the TRICARE Program

- Aetna has shown growth in its TRICARE Prime health care network increasing the number of physicians available to members from 9,304 to more than 12,000. In addition, Aetna has expanded its contracted network hospitals from 85 to 185, more than doubling the number of hospitals available to TRICARE Prime members.
- Palmetto Government Benefits Administrators (Aetna's subcontractor) has processed 84 percent of more than two million claims submitted by beneficiaries and providers within 21 days (averaging 17,500 per day), exceeding the government requirement of 75 percent.
- Aetna TRICARE Service Centers have assisted over 140,000 member walk-ins and nearly 144,500 authorizations for care have been approved.

"In administering the TRICARE contract we feel we have made tremendous progress in providing a managed care program that supplies our beneficiaries with greater accessibility to quality health care, reduced costs, flexibility of heath care plans, a community resource service and increased benefits," Kaplan added.